Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
WESTERN DISTRICT OF WASHINGTON		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this is ar amended filing

## Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

t 1: Identify Yourself			
	About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
Your full name			
Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Alex First name  T		Katelynn First name  E Middle name
Bring your picture identification to your meeting with the trustee.	Graham  Last name and Suffix (Sr., Jr., II, III)		Graham  Last name and Suffix (Sr., Jr., II, III)
All other names you have used in the last 8 years			
Include your married or maiden names.			
Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-9648		xxx-xx-3006
	Your full name  Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.  All other names you have used in the last 8 years Include your married or maiden names.  Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.  Bring your picture identification to your meeting with the trustee.  Graham  Last name and Suffix (Sr., Jr., II, III)  All other names you have used in the last 8 years Include your married or maiden names.  Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.  Graham  Last name and Suffix (Sr., Jr., II, III)  All other names you have used in the last 8 years Include your married or maiden names.  Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number  XXX-XX-9648

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	■ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live		If Debtor 2 lives at a different address:			
		18020 NW Seabeck Holly Road				
		Seabeck, WA 98380  Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Kitsap				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	<ul> <li>Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.</li> </ul>			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

	btor 1 btor 2	Alex T Graham Katelynn E Graha	m			Case number (if known)			
Pai	rt 2:	Tell the Court About	Your Bankrupte	cy Case					
7.	Ban	chapter of the cruptcy Code you are		Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.					
	cho	sing to file under	Chapter 7						
			☐ Chapter 11						
			☐ Chapter 12	!					
			☐ Chapter 13	i					
8.	How	you will pay the fee	about he order. If a pre-pr	ow you may pay. Ty your attorney is sul nted address.	rpically, if you are paying the fe omitting your payment on your	check with the clerk's office in your loc ee yourself, you may pay with cash, ca behalf, your attorney may pay with a c	shier's check, or money credit card or check with		
					stallments. If you choose this onto	option, sign and attach the Application	า for Individuals to Pay		
			☐ I request but is not applies to	et that my fee be we the trequired to, waive to your family size a	raived (You may request this of your fee, and may do so only and you are unable to pay the f	ption only if you are filing for Chapter if your income is less than 150% of th ee in installments). If you choose this Official Form 103B) and file it with you	e official poverty line that option, you must fill out		
9.		you filed for	■ No.						
		ruptcy within the 8 years?	☐ Yes.						
			Dis	trict	When	Case number			
			Dis	trict	When	Case number			
			Dis	trict	When	Case number			
10.		any bankruptcy s pending or being	■ No						
	filed not f you,	by a spouse who is iling this case with or by a business ner, or by an	☐ Yes.						
			De	otor		Relationship to you			
			Dis	trict	When	Case number, if kno	wn		
			De	otor		Relationship to you			
			Dis	trict	When	Case number, if kno	wn		
11.		ou rent your	□ No. G	o to line 12.					
	resio	lence?	■ Yes. H	as your landlord ob	tained an eviction judgment ag	ainst you?			
				No. Go to line	e 12.				

Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it with this bankruptcy petition.

Deb	otor 2 Katelynn E Graha	m			Case number (if known)
Par	t 3: Report About Any Bu	ısinesses	You Own a	as a Sole Proprie	etor
	Are you a sole proprietor of any full- or part-time	■ No.	Go to F		
	business?				
		☐ Yes.	Name a	and location of bus	siness
	A sole proprietorship is a				
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name o	of business, if any	
	If you have more than one sole proprietorship, use a		Numbe	r, Street, City, Sta	ate & ZIP Code
	separate sheet and attach it to this petition.		Check	the appropriate bo	ox to describe your business:
	·				ness (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real	I Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as d	defined in 11 U.S.C. § 101(53A))
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))
				None of the above	e
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation in 11 U.S	s. If you ind ns, cash-flo S.C. 1116(1	licate that you are w statement, and f	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of small	■ No.	1 am no	t illing under Chap	pter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am fili Code.	ng under Chapter	11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am fili	ng under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	t 4: Report if You Own or	Have Any	/ Hazardou	s Property or An	ny Property That Needs Immediate Attention
14.	Do you own or have any	■ No.			
	property that poses or is alleged to pose a threat	☐ Yes.			
	of imminent and identifiable hazard to	<b>—</b> 100.	What is th	e hazard?	
	public health or safety? Or do you own any				
	property that needs immediate attention?			ate attention is why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?	
					Number, Street, City, State & Zip Code

Debtor 1 Alex T Graham

Debtor 1 Alex Debtor 2 Katel

Alex T Graham Katelynn E Graham

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

	otor 1 Alex T Graham otor 2 Katelynn E Graha	m			Case number	(if known)		
Par	t 6: Answer These Quest	ions for Rep	orting Purposes					
	What kind of debts do you have?							
			No. Go to line 16b.	, <b>,</b> ,				
			Yes. Go to line 17.					
			Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
			No. Go to line 16c.	· ·				
			Yes. Go to line 17.					
		16c. S	tate the type of debts you ow	e that are not consu	mer debts or business	debts		
17.	Are you filing under Chapter 7?	□ No. I	am not filing under Chapter 7	. Go to line 18.				
	Do you estimate that after any exempt property is excluded and		am filing under Chapter 7. Do re paid that funds will be avai			rty is excluded and administrative expenses		
	administrative expenses are paid that funds will		No					
	be available for distribution to unsecured creditors?		] Yes					
18.	How many Creditors do you estimate that you owe?	<b>1</b> -49		<b>1</b> ,000-5,000	)	☐ 25,001-50,000		
		☐ 50-99			0	<u> </u>		
		□ 100-199 □ 200-999		☐ 10,001-25,0	000	☐ More than100,000		
19.	How much do you	□ \$0 - \$50	,000	□ \$1,000,001	- \$10 million	☐ \$500,000,001 - \$1 billion		
	estimate your assets to be worth?	<b>\$50,001</b>		□ \$10,000,001 - \$50 r		□ \$1,000,000,001 - \$10 billion		
		□ \$100,001 - \$500,000 □ \$500,001 - \$1 million		□ \$50,000,00°	1 - \$100 million 01 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion		
		\$500,00	1 - \$1 million	Δ ψ100,000,00	01	— Word than too billion		
20.	How much do you	□ \$0 - \$50		□ \$1,000,001		☐ \$500,000,001 - \$1 billion		
	estimate your liabilities to be?	_	- \$100,000	□ \$10,000,00°		\$1,000,000,001 - \$10 billion		
			1 - \$500,000 1 - \$1 million	□ \$50,000,00° □ \$100,000,00	1 - \$100 million 01 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion		
		Φ \$500,00	- φτ mmon	· · · · · · · · · · · · · · · · · · ·				
Par	7: Sign Below							
For	you	I have exam	nined this petition, and I decla	are under penalty of p	perjury that the informa	ation provided is true and correct.		
						under Chapter 7, 11,12, or 13 of title 11, lose to proceed under Chapter 7.		
			ey represents me and I did no I have obtained and read the			an attorney to help me fill out this		
		I request re	lief in accordance with the cha	apter of title 11, Unit	ed States Code, speci	fied in this petition.		
						property by fraud in connection with a ars, or both. 18 U.S.C. §§ 152, 1341, 1519,		
		/s/ Alex T			/s/ Katelynn E Gr			
		Alex T Gra Signature o			Katelynn E Graha Signature of Debtor			
		Executed or	n November 30, 2019		Executed on <b>Nov</b> e	ember 30, 2019		
			MM / DD / YYYY			DD / YYYY		

Debtor 1	Alex T Graham	
Debtor 2	Katelynn E Graham	Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ John C. Andrews	Date	November 30, 2019
Signature of Attorney for Debtor		MM / DD / YYYY
John C. Andrews 21387		
Printed name		
Bishop, Cunningham & Andrews, Inc., (P.S.)		
Firm name		
3330 Kitsap Way		
Box 5060, West Hills Station		
Bremerton, WA 98312		
Number, Street, City, State & ZIP Code		
Contact phone (360) 377-7691	Email address	bca@bcalawyers.com
21387 WA		
Bar number & State		

Fill	n this information to identify your case:		
Deb			
	First Name Middle Name Last Name		
1	or 2 Katelynn E Graham  First Name Middle Name Last Name		
` '	ed States Bankruptcy Court for the: WESTERN DISTRICT OF WASHINGTON		
(if kn	e number wn)	_	ck if this is an nded filing
Su Be a	icial Form 106Sum  nmary of Your Assets and Liabilities and Certain Statistical Information complete and accurate as possible. If two married people are filing together, both are equally responsible fination. Fill out all of your schedules first; then complete the information on this form. If you are filing amend		
you	original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.	ieu scrieu	ules after you file
Par	1: Summarize Your Assets		
			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	90,485.13
	1c. Copy line 63, Total of all property on Schedule A/B	\$	90,485.13
Par	2: Summarize Your Liabilities		
			liabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	92,467.72
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	6,962.58
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	53,579.61
	Your total liabilities	\$	153,009.91
Par	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I)		
	Copy your combined monthly income from line 12 of Schedule I	\$	5,433.32
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,683.02
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	our other so	chedules.
7.	■ Yes What kind of debt do you have?		
	■ Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a persona	al, family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check thi	s box and	submit this form to

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

the court with your other schedules.

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

4,025.00

\$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total o	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	6,962.58
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	22,308.73
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	29,271.31

E111 1	this info		and this filters			
Debto		rmation to identify your case a	and this filing:			
Debic	)	Alex T Graham First Name	Middle Name	Last Name		
Debto		Katelynn E Graham First Name				
(Spous	e, if filing)	First Name	Middle Name	Last Name		
Unite	d States E	ankruptcy Court for the: WES	TERN DISTRICT OF WASH	INGTON		
Case	number					☐ Check if this is an amended filing
Offi	cial F	orm 106A/B				
Scl	nedu	le A/B: Propert	.y			12/15
think it inform Answe	fits best. ation. If mo r every quo	separately list and describe items Be as complete and accurate as p ore space is needed, attach a sepa estion.  e Each Residence, Building, Land	possible. If two married people arate sheet to this form. On the	are filing together, both are e top of any additional pages,	equally responsible for su	pplying correct
		, ,	•			
1. Do y	ou own o	have any legal or equitable intere	est in any residence, building,	and, or similar property?		
	lo. Go to P	art 2.				
	es. Where	is the property?				
Part 2	Describ	e Your Vehicles				
Da	10		interest in any vahiales w	hathar thay are registers	d on mot? In alcola accoun	
		ase, or have legal or equitable rives. If you lease a vehicle, also				enicies you own that
3011100	110 0100 u	invoo. Ii you loddo a voiliolo, aloc	o report it on conedare c. Ex	coatory contracts and one.	xpirou Loudou.	
3. <b>Ca</b> ı	rs, vans, t	rucks, tractors, sport utility ve	ehicles, motorcycles			
	No					
	/es					
_						
3.1	Make:	Jeep	Who has an interest in the	nronarty? Chack and	Do not deduct secured cla	aims or exemptions. Put
3.1		Wrangler	Debtor 1 only	property? Check one	the amount of any secure	
	Model: Year:	2014			Creditors Who Have Clair	ns Secured by Property.
		22222	Debtor 2 only		Current value of the	
	Other info		Debtor 1 and Debtor 2 or	· ·	entire property?	portion you own?
			At least one of the debto	rs and another		
		n: 18020 NW Seabeck oad, Seabeck WA 98380	■ Check if this is commu		\$16,630.00	\$16,630.00
	Tiony ix	oud, Ocubeek WA 30000	(see instructions)	nity property	Ψ10,000.00	Ψ10,000.00
2.0	Makai	Dodge	Mha haa ay intayaat in tha	mramarty? O	Do not deduct secured cla	aims or exemptions. Put
3.2	Make:		Who has an interest in the	property? Check one	the amount of any secure	d claims on Schedule D:
	Model:	Ram 3500	Debtor 1 only		Creditors Who Have Clair	ns Secured by Property.
	Year:	2008	Debtor 2 only		Current value of the	Current value of the
		ate mileage: 85714	Debtor 1 and Debtor 2 of	- <del>-</del>	entire property?	portion you own?
1	Other info		At least one of the debto	rs and another		
		n: 18020 NW Seabeck	<b>=</b> _,		¢10 005 00	¢40 005 00
	mony R	oad, Seabeck WA 98380	Check if this is commu (see instructions)	nity property	\$19,085.00	\$19,085.00

vrolet  page: 97000 :	Who has an interest in the property? Check one  ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this is community property (see instructions)	Do not deduct secured class the amount of any secure Creditors Who Have Claim Current value of the entire property?  \$2,393.00	d claims on Schedule D:
97000 :	■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another ■ Check if this is community property	entire property?	portion you own?
:	☐ At least one of the debtors and another  ☐ Check if this is community property		
	■ Check if this is community property	\$2,393.00	\$2,393.00
ris	check in time to community property	\$2,393.00	\$2,393.00
ris			-
	Who has an interest in the property? Check one	Do not deduct secured cla	
XP100	Debtor 1 only	the amount of any secure Creditors Who Have Clair	
1	Debtor 2 only	Comment value of the	Comment value of the
age: 1000			Current value of the portion you own?
:	☐ At least one of the debtors and another		
ehicle			
	■ Check if this is community property (see instructions)	\$11,395.00	\$11,395.00
esis	Who has an interest in the property? Check one	Do not deduct secured cla	
eme 32 CR Trailer	☐ Debtor 1 only	Creditors Who Have Clair	ms Secured by Property.
1	☐ Debtor 2 only	Current value of the	Current value of the
age:	■ Debtor 1 and Debtor 2 only	entire property?	portion you own?
:	☐ At least one of the debtors and another		
	Check if this is community property	\$36,500.00	\$36,500.00
ailers, motors, personal wa	tercraft, fishing vessels, snowmobiles, motorcycle a	ccessories	
	Who has an interest in the property? Check one	Do not deduct secured cla	
005	Debtor 1 only		
<del></del>	_		
		Current value of the entire property?	Current value of the portion you own?
:	☐ At least one of the debtors and another		· •
	■ Check if this is community property	\$1,500.00	\$1,500.00
	ehicle esis eme 32 CR Trailer age: t, motor homes, ATVs an	Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Check if this is community property  At least one of the debtors and another Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property	Debtor 1 and Debtor 2 only  Check if this is community property  Cee instructions)  Who has an interest in the property? Check one Debtor 1 and Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Current value of the entire property?  Sa6,500.00  Current value of the entire property?  Current value of the entire property?

Alex T Graham

Debtor 1

	btor 1 Alex I Grain btor 2 Katelynn E		Case number (if known	n)
		Love seat, bed, washing machine & dryer		\$500.00
[		and radios; audio, video, stereo, and digital equipment; coll phones, cameras, media players, games  Video game system, cell phones, digital pictu		collections; electronic devices
		video game system, cen phones, digital piota	103, 5753	
ļ		d figurines; paintings, prints, or other artwork; books, picturitions, memorabilia, collectibles	es, or other art objects; stamp, co	in, or baseball card collections;
9. <b>E</b>	Equipment for sports	tographic, exercise, and other hobby equipment; bicycles,	pool tables, golf clubs, skis; canoe	s and kayaks; carpentry tools;
_	☐ Yes. Describe			
ļ	Firearms  Examples: Pistols, rifl  No  ☐ Yes. Describe	es, shotguns, ammunition, and related equipment		
[	Clothes  Examples: Everyday of the control of the	clothes, furs, leather coats, designer wear, shoes, accesso	ries	
		Clothes for 2 adults, 1 child		\$120.00
_	Jewelry Examples: Everyday j □ No ■ Yes. Describe	ewelry, costume jewelry, engagement rings, wedding rings  Engagement ring- \$1000, costume jewerly \$30 \$20.00		, gold, silver \$1,050.00
ı	Non-farm animals  Examples: Dogs, cats  No  □ Yes. Describe	s, birds, horses		
ı	Any other personal a ■ No □ Yes. Give specific in	nd household items you did not already list, including	any health aids you did not list	
15.		e of all of your entries from Part 3, including any entries t number here		\$1,880.00
	t 4: Describe Your Fina			Our and the last of the
Do	you own or have any	legal or equitable interest in any of the following?		Current value of the

Official Form 106A/B Schedule A/B: Property page 3

De	ebtor 2	Katelynn E	Graham		Case number (if known)	
						Do not deduct secured claims or exemptions.
	□ No <sup>′</sup>	,,	have in your wallet, in your h	nome, in a safe deposit box, and on	hand when you file your petiti	on
					Cash	\$1,102.13
17.				counts; certificates of deposit; share ts with the same institution, list each		houses, and other similar
	■ No □ Yes			Institution name:		
18.			or publicly traded stocks investment accounts with be	rokerage firms, money market acco	punts	
	■ No □ Yes		Institution or issue	r name:		
19.		ublicly traded st enture	ock and interests in incorp	porated and unincorporated busi	nesses, including an interes	st in an LLC, partnership, and
		Give specific inf	ormation about them Name of entity:		% of ownership:	
	Negoti Non-no	iable instruments egotiable instrum	include personal checks, ca	notiable and non-negotiable instrusshiers' checks, promissory notes, a ransfer to someone by signing or de	and money orders.	
21	Retiren	nent or pension				
۷,,				403(b), thrift savings accounts, or o	other pension or profit-sharing	plans
	☐ Yes.	List each accour	nt separately.  Type of account:	Institution name:		
22.	Your s Examp		d deposits you have made s	so that you may continue service or , public utilities (electric, gas, water		nies, or others
	■ No □ Yes.			Institution name or individu	al:	
23.	Annuit ■ No	ies (A contract fo	or a periodic payment of mor	ney to you, either for life or for a nur	mber of years)	
	☐ Yes	ls	suer name and description.			
24.			on IRA, in an account in a on 529A(b), and 529(b)(1).	qualified ABLE program, or unde	r a qualified state tuition pro	ogram.
	Yes	ln	stitution name and description	on. Separately file the records of an	y interests.11 U.S.C. § 521(c)	:
	■ No	•		other than anything listed in line	1), and rights or powers exc	ercisable for your benefit
			ormation about them	and ather intellectual		
26.				and other intellectual property eds from royalties and licensing ag	reements	
		•	ormation about them	Oakadala A/D D		
Off	ıcıaı Forr	n 106A/B		Schedule A/B: Property		page

Alex T Graham

Debtor 1

	ebtor 1 ebtor 2	Alex T Graham Katelynn E Graham	Case number (if known)	
27.		es, franchises, and other general intangibles les: Building permits, exclusive licenses, cooperative as:	sociation holdings, liquor licenses, professional licenses	S
	_	Give specific information about them		
M	oney or p	property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax ref	unds owed to you		
		Give specific information about them, including whether	you already filed the returns and the tax years	
29.	■ No	support les: Past due or lump sum alimony, spousal support, chi Give specific information	ild support, maintenance, divorce settlement, property s	settlement
30.		mounts someone owes you  les: Unpaid wages, disability insurance payments, disab benefits; unpaid loans you made to someone else	oility benefits, sick pay, vacation pay, workers' compens	sation, Social Security
	☐ Yes.	Give specific information		
31.		s in insurance policies les: Health, disability, or life insurance; health savings a	ccount (HSA); credit, homeowner's, or renter's insuranc	ee
	☐ Yes. I	Name the insurance company of each policy and list its v Company name:	value. Beneficiary:	Surrender or refund value:
32.	If you a	erest in property that is due you from someone who re the beneficiary of a living trust, expect proceeds from ne has died.		ve property because
	☐ Yes.	Give specific information		
33.	Examp  ■ No	against third parties, whether or not you have filed a les: Accidents, employment disputes, insurance claims,  Describe each claim		
34.	Other c	ontingent and unliquidated claims of every nature, i	ncluding counterclaims of the debtor and rights to s	set off claims
	☐ Yes.	Describe each claim		
35.	■ No	ancial assets you did not already list Give specific information		
36		ne dollar value of all of your entries from Part 4, inclurt 4. Write that number here		\$1,102.13
Pa	ort 5: Des	cribe Any Business-Related Property You Own or Have an	Interest In. List any real estate in Part 1.	
		wn or have any legal or equitable interest in any business-r	related property?	
	No. Go			
	🗀 Yes. G	o to line 38.		

Official Form 106A/B Schedule A/B: Property page 5

Debto Debto			Case number (if known)	
	_			
Part 6	Describe Any Farm- and Commercial Fishing-Related Property You If you own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
46. <b>D</b> o	you own or have any legal or equitable interest in any farm-	or commercial fishir	ng-related property?	
	No. Go to Part 7.			
	Yes. Go to line 47.			
Part 7	Describe All Property You Own or Have an Interest in That You	Did Not List Above		
	o you have other property of any kind you did not already list? Examples: Season tickets, country club membership	?		
	Yes. Give specific information			
54. <i>I</i>	Add the dollar value of all of your entries from Part 7. Write the	at number here		\$0.00
Part 8	List the Totals of Each Part of this Form			
55. <b>F</b>	Part 1: Total real estate, line 2			\$0.00
56. <b>F</b>	Part 2: Total vehicles, line 5	\$87,503.00		
57. <b>F</b>	Part 3: Total personal and household items, line 15	\$1,880.00		
58. <b>F</b>	Part 4: Total financial assets, line 36	\$1,102.13		
59. <b>F</b>	Part 5: Total business-related property, line 45	\$0.00		
60. <b>F</b>	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61. <b>F</b>	Part 7: Total other property not listed, line 54 +	\$0.00		
62. 1	Total personal property. Add lines 56 through 61	\$90,485.13	Copy personal property total	\$90,485.13
63. 1	Total of all property on Schedule A/B. Add line 55 + line 62			\$90,485.13

Fil	II in this inform	nation to identify your case:				
De	ebtor 1	Alex T Graham				
		First Name	Middle Name	L	ast Name	
1 -	ebtor 2 ouse if, filing)	Katelynn E Graham First Name	Middle Name		.ast Name	
`						
Un	nited States Ban	kruptcy Court for the: WES	STERN DISTRICT OF V	VASH	INGTON	
	ase number					☐ Check if this is an amended filing
0	fficial For	<u>m 106C</u>				
S	chedule	C: The Prope	rty You Cla	aim	as Exempt	4/19
		•			•	
the nee	property you lis	sted on <i>Schedule A/B: Propert</i> I attach to this page as many o	y (Official Form 106A/B)	as yo	our source, list the property that you	or supplying correct information. Using claim as exempt. If more space is additional pages, write your name and
			at vou must specify th	0 am	ount of the exemption you claim	One way of doing so is to state a
						eing exempted up to the amount of
					th aids, rights to receive certain by the side of 100% of fair market values.	penefits, and tax-exempt retirement
exe	emption to a pa	rticular dollar amount and t				t, your exemption would be limited
to t	the applicable	statutory amount.				
Pa	rt 1: Identify	the Property You Claim as	Exempt			
1.	Which set of	exemptions are you claimin	<b>g?</b> Check one only, eve	n if yo	our spouse is filing with you.	
	You are cla	iming state and federal nonba	inkruptcy exemptions.	11 U.S	S.C. § 522(b)(3)	
	_	iming federal exemptions. 11				
2		,	3 ( )( )		fill in the information below	
۷.			-	•	fill in the information below.	0
		on of the property and line on hat lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
		olet Aveo 97000 miles	\$2,393.00		\$2,393.00	Wash. Rev. Code §
	Line from Sch	eaule A/B: 3.3			100% of fair market value, up to any applicable statutory limit	6.15.010(1)(d)(iii)
	All Terrain \	s R2RXP100 1000 miles /ehicle	\$11,395.00		\$2,498.69	Wash. Rev. Code § 6.15.010(1)(d)(iii)
	Line from Sch				100% of fair market value, up to any applicable statutory limit	
	2015 Fox 18 Utility trailer		\$1,500.00		\$1,500.00	Wash. Rev. Code § 6.15.010(1)(d)(ii)
	Line from Sch				100% of fair market value, up to any applicable statutory limit	( / / / /
	Cash	edule A/B: <b>16.1</b>	\$1,102.13		\$1,102.13	Wash. Rev. Code § 6.15.010(1)(d)(ii)
	Line nom com	oudio 7 v D. 1 o 1			100% of fair market value, up to any applicable statutory limit	
_	A	shan a bannaataa daasaa d	f	.00		
3.		ning a homestead exemption justment on 4/01/22 and every			iled on or after the date of adjustme	nt.)
	■ No					•
	☐ Yes. Did	you acquire the property cove	red by the exemption w	ithin 1	,215 days before you filed this case	9?
	П Мо		•		-	

Schedule C: The Property You Claim as Exempt

☐ Yes

Official Form 106C

Debtor 1	Alex T Graham	
Debtor 2	Katelynn E Graham	Case number (if known)

	nation to identify you	u case.			
Debtor 1	Alex T Graham				
D. I	First Name	Middle Name Last Name			
Debtor 2 (Spouse if, filing)	Katelynn E Gra	ham  Middle Name  Last Name			
(Opodoc II, IIIIIg)	riotranic				
United States Bar	nkruptcy Court for the	: WESTERN DISTRICT OF WASHINGTON			
Case number					
(if known)					if this is an
				amend	ded filing
Official Form	106D				
		Who Have Claims Secured	hy Property	,	12/15
Scriedule	D. Creditors	Wild Have Claims Secured	by Floperty	<u>y</u>	12/13
		If two married people are filing together, both are equout, number the entries, and attach it to this form. On			
•	have claims secured b	y your property?			
		his form to the court with your other schedules. Yo	u have nothing else to	report on this form.	
_	all of the information	•			
		below.			
	I Secured Claims		Column A	Column B	Column C
		more than one secured claim, list the creditor separately a particular claim, list the other creditors in Part 2. As	Amount of claim	Value of collateral	Unsecured
much as possible, li	st the claims in alphabet	cal order according to the creditor's name.	Do not deduct the	that supports this	portion
2.1 Alaska US	SA FCU	Describe the property that secures the claim:	value of collateral. \$32,041.70	claim \$16,630.00	If any \$15,411.70
Creditor's Name		2014 Jeep Wrangler 89000 miles	ΨοΞ,ο : : : : σ		
		Location: 18020 NW Seabeck Holly			
P.O. Box 1	196613	Road, Seabeck WA 98380			
Anchorag	e, AK	As of the date you file, the claim is: Check all that apply.			
99519-661	3	Contingent			
Number, Street,	City, State & Zip Code	☐ Unliquidated			
		☐ Disputed			
Who owes the de	bt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only		■ An agreement you made (such as mortgage or sect	ured		
Debtor 2 only		car loan)			
■ Debtor 1 and De	ebtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of th	ne debtors and another	☐ Judgment lien from a lawsuit			
Check if this cla community del		Other (including a right to offset)			
	September				
Date debt was incu	ırred 2017	Last 4 digits of account number 5707			

Date debt was incurred 2017

Last 4 digits of account number

Debtor 1 Alex T Graham	(	Case number (if known)		
First Name Middle N	Name Last Name			
Debtor 2 Katelynn E Graham				
First Name Middle N	lame Last Name			
2.2 P1FCU	Describe the property that secures the claim:	\$0.00	\$19,085.00	\$0.00
Creditor's Name	2008 Dodge Ram		Ψ10,000.00	
	2000 2 ougo riam			
654 Southway Avenue				
PO Box 897	As of the date you file, the claim is: Check all that apply.			
Lewiston, ID	☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	□ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only	■ An agreement you made (such as mortgage or see	cured		
Debtor 2 only	car loan)			
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
Check if this claim relates to a	☐ Other (including a right to offset)			
community debt				
<b></b>				
Date debt was incurred	Last 4 digits of account number 0003			
2.3 <b>P1FCU</b>	Describe the property that secures the claim:	\$51,529.71	\$36,500.00	\$15,029.71
Creditor's Name	2018 Genesis Supreme 32CR trailer			
654 Southway Avenue	As of the date you file, the claim is: Check all that			
PO Box 897	apply.			
Lewiston, ID	☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only	■ An agreement you made (such as mortgage or see	cured		
Debtor 2 only	car loan)			
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
Check if this claim relates to a	☐ Other (including a right to offset)			
community debt				
Barriella and an and	0057			
Date debt was incurred	Last 4 digits of account number 8857			
D. D. D. D. L. D.		<b>#0.000.04</b>	<b>044 005 00</b>	40.00
2.4 P1FCU Creditor's Name	Describe the property that secures the claim:	\$8,896.31	\$11,395.00	\$0.00
Creditor's Name	2016 Polaris R2RXP100 1000 miles			
	All Terrain Vehicle			
654 Southway Avenue	As of the date you file, the claim is: Check all that			
Lewiston, ID	apply.			
Number, Street, City, State & Zip Code	Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
Who owes the debt? Check one.	☐ Disputed  Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or see	cured		
Debtor 2 only	car loan)	Jurou		
	☐ Statutory lien (such as tax lien, mechanic's lien)			
Debtor 1 and Debtor 2 only	<u> </u>			
At least one of the debtors and another	Judgment lien from a lawsuit			
Check if this claim relates to a	Other (including a right to offset)			
community debt				
Date debt was incurred	Last 4 digits of account number 0003			

Debtor 1	Alex T Grah	am		Case number (if known)
	First Name	Middle Name	Last Name	
Debtor 2	Katelynn E	Graham		
	First Name	Middle Name	Last Name	
Add the	dollar value of yo	our entries in Column A on t	this page. Write that number here:	\$92,467.72
	the last page of	your form, add the dollar va	lue totals from all pages.	\$92,467.72

### Part 2: List Others to Be Notified for a Debt That You Already Listed

Write that number here:

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Debto					
	or 1 Alex T Graham				
	7.11.02.1.0.1.10.11.1	ddle Name Last Name			
Debto	or 2 Katelynn E Graham				
(Spouse	e if, filing) First Name Mic	ddle Name Last Name			
United	d States Bankruptcy Court for the: WESTE	ERN DISTRICT OF WASHINGTON	<u> </u>		
Cooo	number				
(if know	number /n)			☐ Check	if this is an
	,			_	ed filing
			I	a	oug
Offic	cial Form 106E/F				
Sch	edule E/F: Creditors Who Ha	ve Unsecured Claims			12/15
any exe Schedu Schedu eft. Att name a	complete and accurate as possible. Use Part 1 for ecutory contracts or unexpired leases that could alle G: Executory Contracts and Unexpired Lease Use D: Creditors Who Have Claims Secured by Protect the Continuation Page to this page. If you hand case number (if known).	d result in a claim. Also list executory es (Official Form 106G). Do not includ roperty. If more space is needed, cop lave no information to report in a Part	y contracts on Schedule A/B: P le any creditors with partially so y the Part you need, fill it out, n	roperty (Official Form ecured claims that a number the entries ir	n 106A/B) and on re listed in the boxes on the
Part 1					
_	o any creditors have priority unsecured claims a	gainst you?			
	No. Go to Part 2.				
	Yes.				
ide po	st all of your priority unsecured claims. If a credi entify what type of claim it is. If a claim has both pric ossible, list the claims in alphabetical order accordinat art 1. If more than one creditor holds a particular cla	ority and nonpriority amounts, list that cla g to the creditor's name. If you have mo	aim here and show both priority ar	nd nonpriority amount	s. As much as
(F	or an explanation of each type of claim, see the inst	tructions for this form in the instruction b			
			Total claim	Priority amount	Nonpriority amount
2.1	IRS	Last 4 digits of account number	\$1,475.30	\$1,475.30	\$0.00
	Priority Creditor's Name	_	<u> </u>	<u> </u>	40.00
		When was the debt incurred?	2017		
	Number Street City State Zip Code	As of the date you file, the claim is	S: Chock all that apply		
,	Who incurred the debt? Check one.	_	S. Check all that apply		
	☐ Debtor 1 only	□ Contingent			
	Li Debior i only	_			
		☐ Unliquidated			
	☐ Debtor 2 only	☐ Unliquidated☐ Disputed			
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only		n:		
 	Debtor 1 and Debtor 2 only	□ Disputed	n:		
 	■ Debtor 1 and Debtor 2 only  □ At least one of the debtors and another	☐ Disputed  Type of PRIORITY unsecured claim  ☐ Domestic support obligations			
     	□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt	☐ Disputed  Type of PRIORITY unsecured clain  ☐ Domestic support obligations  ☐ Taxes and certain other debts yo	u owe the government		
 	Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim is for a community debt s the claim subject to offset?	☐ Disputed  Type of PRIORITY unsecured claim  ☐ Domestic support obligations  ☐ Taxes and certain other debts yo  ☐ Claims for death or personal injuries	u owe the government ry while you were intoxicated		
 	■ Debtor 1 and Debtor 2 only  □ At least one of the debtors and another  ■ Check if this claim is for a community debt s the claim subject to offset?  ■ No	☐ Disputed  Type of PRIORITY unsecured clain  ☐ Domestic support obligations  ☐ Taxes and certain other debts yo	u owe the government ry while you were intoxicated		
 	Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim is for a community debt s the claim subject to offset?	☐ Disputed  Type of PRIORITY unsecured claim  ☐ Domestic support obligations  ☐ Taxes and certain other debts yo  ☐ Claims for death or personal injuries	u owe the government ry while you were intoxicated		
 	■ Debtor 1 and Debtor 2 only  □ At least one of the debtors and another  ■ Check if this claim is for a community debt s the claim subject to offset?  ■ No	☐ Disputed  Type of PRIORITY unsecured claim  ☐ Domestic support obligations  ☐ Taxes and certain other debts yo  ☐ Claims for death or personal injuries	u owe the government ry while you were intoxicated	\$3,689.66	\$0.00
 	□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt s the claim subject to offset? □ No □ Yes	□ Disputed  Type of PRIORITY unsecured claim □ Domestic support obligations ■ Taxes and certain other debts you □ Claims for death or personal injurice □ Other. Specify  Last 4 digits of account number	u owe the government ry while you were intoxicated		\$0.00
 	Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim is for a community debt s the claim subject to offset?  No Yes  IRS Priority Creditor's Name	□ Disputed  Type of PRIORITY unsecured claim □ Domestic support obligations ■ Taxes and certain other debts you □ Claims for death or personal injurice □ Other. Specify  Last 4 digits of account number When was the debt incurred?	u owe the government ry while you were intoxicated  \$3,689.66		\$0.00
2.2	Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim is for a community debt s the claim subject to offset?  No Yes  IRS  Priority Creditor's Name	□ Disputed  Type of PRIORITY unsecured claim □ Domestic support obligations ■ Taxes and certain other debts you □ Claims for death or personal injuri □ Other. Specify  Last 4 digits of account number When was the debt incurred?  As of the date you file, the claim is	u owe the government ry while you were intoxicated  \$3,689.66		\$0.00
2.2	Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim is for a community debt s the claim subject to offset?  No Yes  IRS Priority Creditor's Name  Number Street City State Zip Code  Who incurred the debt? Check one.	□ Disputed  Type of PRIORITY unsecured claim □ Domestic support obligations ■ Taxes and certain other debts yo □ Claims for death or personal injuice □ Other. Specify  Last 4 digits of account number —  When was the debt incurred?  As of the date you file, the claim is □ Contingent	u owe the government ry while you were intoxicated  \$3,689.66		\$0.00
22.2	Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim is for a community debt s the claim subject to offset?  No Yes  IRS Priority Creditor's Name  Number Street City State Zip Code Who incurred the debt? Check one.	□ Disputed  Type of PRIORITY unsecured claim □ Domestic support obligations ■ Taxes and certain other debts you □ Claims for death or personal injuri □ Other. Specify  Last 4 digits of account number When was the debt incurred?  As of the date you file, the claim is □ Contingent □ Unliquidated	u owe the government ry while you were intoxicated  \$3,689.66		\$0.00
22.2	Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim is for a community debt s the claim subject to offset?  No Yes  IRS Priority Creditor's Name  Number Street City State Zip Code  Who incurred the debt? Check one.	□ Disputed  Type of PRIORITY unsecured claim □ Domestic support obligations ■ Taxes and certain other debts yo □ Claims for death or personal injuice □ Other. Specify  Last 4 digits of account number —  When was the debt incurred?  As of the date you file, the claim is □ Contingent	u owe the government ry while you were intoxicated  \$3,689.66		\$0.00
2.2	Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim is for a community debt s the claim subject to offset?  No Yes  IRS Priority Creditor's Name  Number Street City State Zip Code Who incurred the debt? Check one.	□ Disputed  Type of PRIORITY unsecured claim □ Domestic support obligations ■ Taxes and certain other debts you □ Claims for death or personal injuri □ Other. Specify  Last 4 digits of account number When was the debt incurred?  As of the date you file, the claim is □ Contingent □ Unliquidated	u owe the government ry while you were intoxicated  \$3,689.66  2017  s: Check all that apply		\$0.00
2.2	Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim is for a community debt sethe claim subject to offset?  No Yes  IRS Priority Creditor's Name  Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only  Debtor 2 only	□ Disputed  Type of PRIORITY unsecured claim □ Domestic support obligations ■ Taxes and certain other debts you □ Claims for death or personal injurice □ Other. Specify  Last 4 digits of account number When was the debt incurred?  As of the date you file, the claim is □ Contingent □ Unliquidated □ Disputed	u owe the government ry while you were intoxicated  \$3,689.66  2017  s: Check all that apply		\$0.00
2.2	Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim is for a community debt set the claim subject to offset?  No Yes  IRS Priority Creditor's Name  Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only  Debtor 2 only  At least one of the debtors and another	□ Disputed  Type of PRIORITY unsecured claim □ Domestic support obligations ■ Taxes and certain other debts yo □ Claims for death or personal injuit □ Other. Specify  Last 4 digits of account number When was the debt incurred?  As of the date you file, the claim is □ Contingent □ Unliquidated □ Disputed  Type of PRIORITY unsecured claim □ Domestic support obligations	u owe the government ry while you were intoxicated  \$3,689.66  2017  S: Check all that apply  m:		\$0.00
2.2	Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim is for a community debt s the claim subject to offset?  No Yes  IRS Priority Creditor's Name  Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only  At least one of the debtors and another  Check if this claim is for a community debt	□ Disputed  Type of PRIORITY unsecured claim □ Domestic support obligations ■ Taxes and certain other debts you □ Claims for death or personal injuri □ Other. Specify  Last 4 digits of account number When was the debt incurred?  As of the date you file, the claim is □ Contingent □ Unliquidated □ Disputed  Type of PRIORITY unsecured claim □ Domestic support obligations ■ Taxes and certain other debts you	u owe the government ry while you were intoxicated  \$3,689.66  2017  S: Check all that apply  n: u owe the government		\$0.00
2.2	Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim is for a community debt set the claim subject to offset?  No Yes  IRS Priority Creditor's Name  Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only  Debtor 2 only  At least one of the debtors and another	□ Disputed  Type of PRIORITY unsecured claim □ Domestic support obligations ■ Taxes and certain other debts yo □ Claims for death or personal injuit □ Other. Specify  Last 4 digits of account number When was the debt incurred?  As of the date you file, the claim is □ Contingent □ Unliquidated □ Disputed  Type of PRIORITY unsecured claim □ Domestic support obligations	\$3,689.66 2017 S: Check all that apply  The control of the control	\$3,689.66	\$0.00

ebtor 2 Katelynn E Graham		Case n	umber (if known)		
IRS	Last 4 digits of account number		\$1,797.62	\$1,797.62	\$0.
Priority Creditor's Name	When was the debt incurred?	2018			
Number Street City State Zip Code	As of the date you file, the claim	is: Check a	Il that apply		
Who incurred the debt? Check one.	☐ Contingent				
Debtor 1 only	☐ Unliquidated				
Debtor 2 only	Disputed				
■ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	im:			
☐ At least one of the debtors and another	☐ Domestic support obligations				
■ Check if this claim is for a community debt	Taxes and certain other debts y	ou owe the	government		
Is the claim subject to offset?	Claims for death or personal inj	ury while yo	u were intoxicated		
■ No	Other. Specify				
Yes					
	alphabetical order of the creditor	who holds (			
■ Yes.	e alphabetical order of the creditor value. For each claim listed, identify wh	who holds on at type of cl	aim it is. Do not list claims	s already included in Piss fill out the Continuati	art 1. If more ion Page of
Yes.  List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2.	e alphabetical order of the creditor of the creditor of the creditor of the creditor of the creditors in Part 3.If you have more to	who holds on the second type of clean three no	laim it is. Do not list claims onpriority unsecured claim	s already included in P	art 1. If more ion Page of
Yes.  List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2.  AES  Nonpriority Creditor's Name  PO Box 65093	e alphabetical order of the creditor value. For each claim listed, identify wh	who holds on the type of clean three not the decrease with the decrease with the type of type of the type of type	laim it is. Do not list claims onpriority unsecured claim	s already included in Pis fill out the Continuati  Total cla	art 1. If more ion Page of
■ Yes.  List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2.  AES  Nonpriority Creditor's Name	e alphabetical order of the creditor of laim. For each claim listed, identify who creditors in Part 3.If you have more to the Last 4 digits of account number.	who holds on the notation three notations are not	laim it is. Do not list claims on priority unsecured claims  s  ust 2003-June 2004	s already included in Pis fill out the Continuati  Total cla	art 1. If more ion Page of
■ Yes.  List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2.  AES  Nonpriority Creditor's Name  PO Box 65093  Baltimore, MD 21264-5093  Number Street City State Zip Code	e alphabetical order of the creditor of laim. For each claim listed, identify who creditors in Part 3.If you have more to the Last 4 digits of account number.  When was the debt incurred?	who holds on the notation three notations are not	laim it is. Do not list claims on priority unsecured claims  s  ust 2003-June 2004	s already included in Pis fill out the Continuati  Total cla	art 1. If more ion Page of
List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2.  AES  Nonpriority Creditor's Name  PO Box 65093  Baltimore, MD 21264-5093  Number Street City State Zip Code  Who incurred the debt? Check one.	e alphabetical order of the creditor of laim. For each claim listed, identify who creditors in Part 3.lf you have more to the Last 4 digits of account numb  When was the debt incurred?  As of the date you file, the cla	who holds on the notation three notations are not	laim it is. Do not list claims on priority unsecured claims  s  ust 2003-June 2004	s already included in Pis fill out the Continuati  Total cla	art 1. If more ion Page of
List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2.  AES  Nonpriority Creditor's Name PO Box 65093 Baltimore, MD 21264-5093  Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only	e alphabetical order of the creditor laim. For each claim listed, identify we creditors in Part 3.If you have more to Last 4 digits of account numb  When was the debt incurred?  As of the date you file, the cla	who holds on the notation three notations are not	laim it is. Do not list claims on priority unsecured claims  s  ust 2003-June 2004	s already included in Pis fill out the Continuati  Total cla	art 1. If more ion Page of
List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2.  AES  Nonpriority Creditor's Name PO Box 65093 Baltimore, MD 21264-5093  Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only  Debtor 2 only	e alphabetical order of the creditor of laim. For each claim listed, identify what creditors in Part 3.If you have more to creditors in Part 4 digits of account number.  When was the debt incurred?  As of the date you file, the claim Contingent Unliquidated	who holds of the control of the cont	laim it is. Do not list claims on priority unsecured claims  s  ust 2003-June 2004	s already included in Pis fill out the Continuati  Total cla	art 1. If more ion Page of
List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2.  AES  Nonpriority Creditor's Name  PO Box 65093  Baltimore, MD 21264-5093  Number Street City State Zip Code  Who incurred the debt? Check one.  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only	e alphabetical order of the creditor laim. For each claim listed, identify who creditors in Part 3.If you have more to be a count numb.  Last 4 digits of account numb.  When was the debt incurred?  As of the date you file, the claim Contingent.  Unliquidated.  Disputed	who holds of the type of clean three not be seen as a seen	laim it is. Do not list claims on priority unsecured claims  s  ust 2003-June 2004	s already included in Pis fill out the Continuati  Total cla	art 1. If more ion Page of
List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2.  AES  Nonpriority Creditor's Name  PO Box 65093  Baltimore, MD 21264-5093  Number Street City State Zip Code  Who incurred the debt? Check one.  Debtor 1 only  Debtor 2 only  At least one of the debtors and another  Check if this claim is for a community debt	e alphabetical order of the creditor laim. For each claim listed, identify what creditors in Part 3.If you have more to creditors in Part 4.If you have more to credit	who holds on the type of claim three not han three not have no	laim it is. Do not list claims on priority unsecured claims on priority unsecured claims on the claims of the clai	s already included in Pis fill out the Continuati  Total cla	art 1. If more ion Page of
List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2.  AES  Nonpriority Creditor's Name PO Box 65093 Baltimore, MD 21264-5093  Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	e alphabetical order of the creditor laim. For each claim listed, identify what creditors in Part 3.If you have more to credit a second to	who holds on the type of claim three not han three not have no	laim it is. Do not list claims on priority unsecured claims on priority unsecured claims are used to be some some some some some some some som	s already included in Pis fill out the Continuati  Total cla	art 1. If more ion Page of
List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2.  AES  Nonpriority Creditor's Name  PO Box 65093  Baltimore, MD 21264-5093  Number Street City State Zip Code  Who incurred the debt? Check one.  Debtor 1 only  Debtor 2 only  Debtor 2 only  At least one of the debtors and another  Check if this claim is for a community debt	e alphabetical order of the creditor laim. For each claim listed, identify what creditors in Part 3.If you have more to creditors in Part 4.If you have more to credit	who holds on the type of claim three not han three not have not han three not have n	laim it is. Do not list claims on priority unsecured claims on priority unsecured claims are used to be some some some some some some some som	s already included in Pis fill out the Continuati  Total cla	art 1. If more ion Page of

	1 Alex T Graham 2 Katelynn E Graham		Case number (if known)			
4.2	AES	Last 4 digits of account number	2218	\$9,192.36		
	Nonpriority Creditor's Name PO Box 65093 Baltimore, MD 21264-5093	When was the debt incurred?	August 2005-June 2008			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply			
	☐ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured	d claim:			
	At least one of the debtors and another	Student loans	. oldiiii.			
	☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not			
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts			
	☐ Yes	☐ Other. Specify				
	_ 163	Student Lo	an			
4.0	A		4000	<b>\$4.004.05</b>		
4.3	AmeriCollect, Inc. Nonpriority Creditor's Name	Last 4 digits of account number		\$1,304.85		
	1851 S Alverno Rd Manitowoc, WI 54221-1566	When was the debt incurred?	01/13/2019			
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply			
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	■ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts			
	☐ Yes	Other. Specify Multicare -	Medical Services			
4.4	Beesley, Erin P.	Last 4 digits of account number	SIWA	\$1,424.37		
	Nonpriority Creditor's Name	When was the debt incurred?	8/3/2019			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply			
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	■ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not			
	No	Debts to pension or profit-sharin	g plans, and other similar debts			
	Yes	■ Other. Specify Medical set	VICES			

Debto	r 2 Katelynn E Graham	Case number ( <sub>if known</sub> )	
4.5	Chase Freedom	Last 4 digits of account number 7041	\$2,256.93
	Nonpriority Creditor's Name PO Box 6294	When was the debt incurred?	•
	Carol Stream, IL 60197		
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Пол	
		☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Consumer Debt	
4.6	Chase Freedom	Last 4 digits of account number 3743	\$13,153.97
	Nonpriority Creditor's Name	When we the debt in some 40	
	PO Box 6294 Carol Stream, IL 60197	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	■ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card	
4.7	СНІ	Last 4 digits of account number 9780	\$778.81
	Nonpriority Creditor's Name PO Box 31001-1975	When was the debt incurred? 1/9/2019	
	Pasadena, CA 91110-1975	When was the debt incurred:	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Who incurred the debt? Check one.  ☐ Debtor 1 only	☐ Contingent	
	_	☐ Contingent	
	Debtor 1 only	Unliquidated	
	☐ Debtor 1 only ☐ Debtor 2 only		

debt

■ No

☐ Yes

Is the claim subject to offset?

 $\hfill \Box$  Obligations arising out of a separation agreement or divorce that you did not report as priority claims

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Medical Services

Debto Debto	or 1 Alex T Graham or 2 Katelynn E Graham		Case number (if known)	
4.8	CHI Franciscan	Last 4 digits of account number	9780	\$833.02
	Nonpriority Creditor's Name PO Box 31001-1975	When was the debt incurred?	02/22/2019	
	Pasadena, CA 91110-1975  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent		
		☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community debt	Student loans		
	Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Medical Se	rvices	
4.9	Erichsen, Christian A	Last 4 digits of account number	5500	\$40.95
	Nonpriority Creditor's Name	When was the debt incurred?	7/3/2019	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	■ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Medical Se	rvices	
4.1	Evergreen Financial Services	Last 4 digits of account number	6021	\$103.64
	Nonpriority Creditor's Name 12147 N. 16th Ave.	When was the debt incurred?	12/18/2018	
	Yakima, WA 98902  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	Пол		
	Debtor 2 only	☐ Contingent		
	■ Debtor 1 and Debtor 2 only	☐ Unliquidated		
	☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured	1 claim:	
	Check if this claim is for a community	Student loans	. VIG	
	debt Is the claim subject to offset?		ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	□Yes		vices-Kennewick Emergency	

Debt Debt			Case number (if known)	
4.1 1	Evergreen Professional Recover	Last 4 digits of account number	9599	\$2,754.58
	Nonpriority Creditor's Name 12100 NE 195th Street Bothell, WA 98011	When was the debt incurred?	01/14/2019-01/31/2019	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community debt	☐ Student loans	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	nation agreement of divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Kaiser Perr	manente - Medical Services	
4.1 2	Hongxiu Ji	Last 4 digits of account number	2027	\$283.12
	Nonpriority Creditor's Name	When was the debt incurred?	7/3/2019	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Medical Se	rvices	
4.1 3	Ise, Michael R.	Last 4 digits of account number		\$17.00
	Nonpriority Creditor's Name	When was the debt incurred?	08/04/2019	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	■ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Medical Se	rvices	

Kaiser Permanente	Last 4 digits of account number	1433	\$2,874.3
Nonpriority Creditor's Name PO Box 740488 Los Angeles, CA 90074-0488	When was the debt incurred?	1/14/19-1/31/19	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
■ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	ng plans, and other similar debts	
Yes	Other. Specify Medical Se	rvices	
Kennewick Emergency Physicians	Last 4 digits of account number	L010	\$103.6
Nonpriority Creditor's Name	Last 4 digits of account number		ψ100.
PO Box S	When was the debt incurred?	12/18/18	
Kennewick, WA 99336-0611  Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim	S. Oncok all that apply	
☐ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
■ Check if this claim is for a community	☐ Student loans		
debt	<u></u>	aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	,	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other. Specify Medical Se	rvices	
Kitsap OBGYN PLLC	Last 4 digits of account number	8455	\$60.0
Nonpriority Creditor's Name 9750 Levin Rd NW	When was the debt incurred?	1/23/2019 and 3/04/2019	
Silverdale, WA 98383-8399  Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	,		
☐ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
■ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?		aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	■ Other. Specify Medical ser	rvices-office visits	

	Alex I Granam  Katelynn E Graham		Case number (if known)	
4.1	Multicare Health Systems	Last 4 digits of account number	7155	\$237.26
·	Nonpriority Creditor's Name PO Box 34883	When was the debt incurred?	01/13/19	
	Seattle, WA 98124-1883  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	Student loans	. J.	
	debt Is the claim subject to offset?	_	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other Specify Medical set	rvices	
4.1	NCMI	Last 4 digits of account number	0001	\$908.23
	Nonpriority Creditor's Name 1919 N. Pittsburgh St Ste B Kennewick, WA 99336	When was the debt incurred?	09/26/2019	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	■ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	Other. Specify Medical set	vices - TRIOS HEALTH LLC	
4.1 9	Olympic Anesthesia Svs	Last 4 digits of account number	5501	\$1,433.81
	Nonpriority Creditor's Name 990 Sylan Way Bremerton, WA 98310	When was the debt incurred?	09/11/2019	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	■ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	Other Specify Medical Se	rvices-anesthesia services	

Pappas, Theressa J	Last 4 digits of account number	8374	\$315.00
Nonpriority Creditor's Name	When was the debt incurred?	8/4/2019	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	_	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□Yes	Other. Specify Medical Se	rvices	
Puget Sound Collect	Last 4 digits of account number	2646	\$107.71
Nonpriority Creditor's Name PO Box 3011	When was the debt incurred?	06/07/2019	
Tacoma, WA 98401-9222 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	•	,	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	☐ Student loans		
debt		aration agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims		
No	☐ Debts to pension or profit-sharin		
□Yes	Other. Specify Physicians	rvices (West Sound Emergency )	
Ronan, James P.	Last 4 digits of account number	2450	\$17.00
Nonpriority Creditor's Name	When was the debt incurred?	8/9/2019	·
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.  ☐ Debtor 1 only			
Debtor 2 only	☐ Contingent		
<u>_</u>	Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed	Lateta.	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	a ciaim:	
Check if this claim is for a community	☐ Student loans	vection agreement or divorce that were did and	
s the claim subject to offset?	<ul> <li>Obligations arising out of a sepa report as priority claims</li> </ul>	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other. Specify Medical Se	rvices	

Katelynn E Graham		Case number (if known)	
Russell B. Voegtlen, Jr., MD	Last 4 digits of account number	2258	\$3
Nonpriority Creditor's Name Kitsap Children's Clinic 9951 Mickelberry Rd NW #101 Silverdale, WA 98383	When was the debt incurred?	8/7/2019-8/9/2019	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
■ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	■ Other. Specify Medical Se	rvices	
Scott & Nelson, PLLC	Last 4 digits of account number		\$37
Nonpriority Creditor's Name			***
1007 8th Street	When was the debt incurred?	February 28, 2019	
Bremerton, WA 98337 Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	, , , , , , , , , , , , , ,	one on an anat appry	
☐ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
■ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	ng plans, and other similar debts	
Yes	Other. Specify		
Shkolnick, Christine R	Local A distinct of account number	6130	\$4
Nonpriority Creditor's Name	Last 4 digits of account number		Ψ4
., . ,	When was the debt incurred?	8/6/2019	
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
■ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	$\square$ Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	■ Other. Specify Medical Se	rvices	

Debt Debt	or 1 Alex I Granam or 2 Katelynn E Graham		Case number (if known)	
4.2 6	TRIOS Health	Last 4 digits of account number	0001	\$908.23
<u> </u>	Nonpriority Creditor's Name PO Box 24661	When was the debt incurred?	12/18/18	
	Seattle, WA 98124-0001  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	_	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Medical Se	rvices	
4.2 7	Tuatoo, Roberta L.	Last 4 digits of account number	6110	\$13.05
<i>'</i>	Nonpriority Creditor's Name	_		·
		When was the debt incurred?	8/5/2019	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	■ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify Medical Se	rvices	
4.2 8	United Collection Bureau, Inc.	Last 4 digits of account number	6828	\$778.81
	Nonpriority Creditor's Name 5620 Southwyck Blvd. Ste 206 Toledo, OH 43614	When was the debt incurred?	01/09/2019	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	■ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	<u> </u>	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	■ Other. Specify Medical ser	vices-hospital visits	

Debtor 1	Alex T Graham	
Debtor 2	Katelynn E Graham	Case number (if known)

West Sound Emergency Physician	Last 4 digits of account number	5899	\$104.48
Nonpriority Creditor's Name	-		
PO Box 95249	When was the debt incurred?	01/2019	
Oklahoma City, OK 73143-5249	_		
Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
■ Check if this claim is for a community	☐ Student loans		
debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
□Yes	Other. Specify Medical Se	rvices	

### Part 3: List Others to Be Notified About a Debt That You Already Listed

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
6a.	Domestic support obligations	6a.	\$	0.00
6b.	Taxes and certain other debts you owe the government	6b.	\$	6,962.58
6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	6,962.58
				Total Claim
6f.	Student loans	6f.	\$	22,308.73
6g.	Obligations arising out of a separation agreement or divorce that	0-	œ.	0.00
C.L		•	· —	
			\$	0.00
6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	31,270.88
6i	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	53,579.61
	6c. 6d. 6e. 6f.	<ul> <li>6b. Taxes and certain other debts you owe the government</li> <li>6c. Claims for death or personal injury while you were intoxicated</li> <li>6d. Other. Add all other priority unsecured claims. Write that amount here.</li> <li>6e. Total Priority. Add lines 6a through 6d.</li> <li>6f. Student loans</li> <li>6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> <li>6h. Debts to pension or profit-sharing plans, and other similar debts</li> <li>6i. Other. Add all other nonpriority unsecured claims. Write that amount here.</li> </ul>	6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. 6e. Total Priority. Add lines 6a through 6d. 6e. 6f. Student loans 6f. 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. 6i.	6a. Domestic support obligations  6a. \$  6b. Taxes and certain other debts you owe the government  6c. Claims for death or personal injury while you were intoxicated  6d. Other. Add all other priority unsecured claims. Write that amount here.  6d. \$  6e. Total Priority. Add lines 6a through 6d.  6f. Student loans  6f. \$  6g. \$  6h. Debts to pension or profit-sharing plans, and other similar debts  6i. Other. Add all other nonpriority unsecured claims. Write that amount here.  6s. \$  6c. \$  6d. \$  6c. \$  6d. \$  6c. \$  6d. \$  6e. \$  6f.

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Fill in this inform	nation to identify your	case:		
Debtor 1	Alex T Graham			
	First Name	Middle Name	Last Name	
Debtor 2	Katelynn E Graha	ım		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the:	WESTERN DISTRICT C	DF WASHINGTON	
Case number				
(if known)				Check if this is an
				amended filing

# Official Form 106G

# **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

State what the contract or lease is for

2.1 AT&T P.O. Box 755 Atwater, CA 95301-0755

Fill in this i	nformation to identify you	ır case:			
Debtor 1	Alex T Graham				
Dobtor 2	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	Katelynn E Gral First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the	: WESTERN DISTRICT	OF WASHINGTON		
Case number	or				
(if known)	aı				☐ Check if this is an
					amended filing
Official	Form 10611				
	Form 106H				
Schedi	ule H: Your Co	debtors			12/15
1. Do y	ou have any codebtors? (	If you are filing a joint case	, do not list either spouse	as a codebtor.	
■ No □ Yes					
	in the last 8 years, have yo , California, Idaho, Louisian				states and territories include
<b>=</b>					
_	Go to line 3. Did your spouse, former sp	ouse or legal equivalent liv	ve with you at the time?		
<b>□</b> 163.	Dia your spouse, former sp	ouse, or legal equivalent in	re with you at the time:		
in line 2 Form 1 out Col	2 again as a codebtor only 06D), Schedule E/F (Offici lumn 2. column 1: Your codebtor	y if that person is a guara ial Form 106E/F), or Sche	ntor or cosigner. Make	sure you have listed the 16G). Use Schedule D, S	with you. List the person shown e creditor on Schedule D (Official Schedule E/F, or Schedule G to fill ditor to whom you owe the debt
Na	ame, Number, Street, City, State and	I ZIP Code		Check all schedules	s that apply:
3.1				☐ Schedule D, line	
	ame			☐ Schedule E/F, lir	
				☐ Schedule G, line	
N	umber Street			_	
С	ity	State	ZIP Code		
3.2				☐ Schedule D, line	
	ame			□ Schedule E, line	
				☐ Schedule G, line	
N	umber Street			_	
	ity	State	ZIP Code		

Fill	in this information to	o identify your ca	ase:				1					
Del	btor 1	Alex T Graha	am									
	btor 2 buse, if filing)	Katelynn E (	Graham									
Uni	ited States Bankrupt	tcy Court for the	WESTERN DISTRICT	OF WA	SHINGTON							
Case number (If known)								Check if this is:  An amended filing  A supplement showing postpetition chapter 13 income as of the following date:				
0	fficial Form	106I						MM / DD/ Y	YYY			
S	chedule I: `	Your Inco	ome								12/15	
sup spo atta	plying correct info use. If you are sep ch a separate shee	rmation. If you arated and you	sible. If two married peo are married and not filir r spouse is not filing wi On the top of any addition	ng jointly th you, o	/, and your spo do not include	ouse is liv	ing wi	ith you, inclu out your spo	ude infor use. If m	mation about nore space is r	your needed,	
1.	Fill in your emplo	oyment		Debto	r 1			Debtor 2	or non-	filing spouse		
	•	If you have more than one job, attach a separate page with information about additional employers.	Employment status	■ Employed			■ Employed					
			Employment status	☐ Not employed			☐ Not employed					
	employers.		Occupation	Delivery Driver				Delivery Coordinator				
Include part-time, seasonal, or self-employed work.		Employer's name	Columbia Distributing				Lowes Home Improvement					
	Occupation may in or homemaker, if i		Employer's address	22200 Dauntless Dr NW Poulsbo, WA 98370				NW Myhre Road dale, WA 98383				
How long emp		How long employed ti	here? 7 months			6 months						
Pai	rt 2: Give Det	ails About Mor	thly Income									
spoi	use unless you are s	separated.	ate you file this form. If y		3 1	,	•	·		•	J	
	e space, attach a se		ore than one employer, co this form.	iiiDiiie li	ie iiiiOiiiialiOii I	or all empli	Jyers i	or that perso	ii oii tiie	iii ies beiow. II y	ou need	
							For [	Debtor 1		ebtor 2 or ling spouse		
2.		•	ry, and commissions (be		,	2. \$		4,435.50	\$	2,131.08		

0.00

4,435.50

3.

+\$

0.00

2,131.08

Estimate and list monthly overtime pay.

Calculate gross Income. Add line 2 + line 3.

3.

Debtor 1 Alex T Graham
Catelynn E Graham

Case number (if known)

				For	Debtor 1	For Debtor 2 or non-filing spouse		
	Сору	/ line 4 here	4.	\$	4,435.50	\$	2,131.08	
5.	List a	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	797.00	\$	325.02	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	0.00	-
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	0.00	=
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00	-
	5e.	Insurance	5e.	\$	11.24	\$	0.00	-
	5f.	Domestic support obligations	5f.	\$	0.00	\$	0.00	-
	5g.	Union dues	5g.	\$_	0.00	\$	0.00	-
	5h.	Other deductions. Specify:	5h.+	\$	0.00	· <u> </u>	0.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	808.24	\$	325.02	=
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	3,627.26	\$	1,806.06	-
8.	List a 8a.	All other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	0.00	
	8b.	Interest and dividends	8b.	\$	0.00	\$	0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	0.00	-
	8d.	Unemployment compensation	8d.	\$	0.00	\$	0.00	-
	8e.	Social Security	8e.	\$	0.00	\$	0.00	-
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:  Pension or retirement income	8f. 8g.	\$_ \$	0.00	\$ \$	0.00	
	8h.	Other monthly income. Specify:	8h.+	\$	0.00	+ \$	0.00	-
		· · · · · · · · · · · · · · · · · · ·						¬
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	0.00	)
10.		ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$_	;	3,627.26 + \$_	1,806.0	6 = \$	5,433.32
11.	Includ other	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your friends or relatives.  ot include any amounts already included in lines 2-10 or amounts that are not a lify:	depend			ed in <i>Sched</i> e	ule J. . +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines						5,433.32
10	Do		2				Combin monthly	ned y income
13.	■ No Ac	ou expect an increase or decrease within the year after you file this form?  No.	<b>'</b>					
		Yes. Explain:						

Fill	in this information to i	dentify your case:							
Deb	otor 1 Alex	T Graham			Che	eck if this is:			
	otor 2 Katel ouse, if filing)	ynn E Graham			<ul><li>☐ An amended filing</li><li>☐ A supplement showing postpetition chapter</li><li>13 expenses as of the following date:</li></ul>				
Uni	ted States Bankruptcy Co	ourt for the: WEST	ERN DISTRICT OF WASH	NGTON		MM / DD / YYYY			
Cas	se numbe <b>r</b>								
1	nown)								
	fficial Form 1								
	chedule J: Y						12/15		
info		ace is needed, att	e. If two married people ar ach another sheet to this on.						
Par	t 1: Describe You Is this a joint case								
•••	☐ No. Go to line 2.	-							
	■ Yes. Does Debte	or 2 live in a sepa	rate household?						
	■ No □ Yes. Deb	tor 2 must file Offic	cial Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Del	otor 2.			
2.	Do you have deper	ndents?							
	Do not list Debtor 1 Debtor 2.		Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?		
	Do not state the						□ No		
	dependents names.			Son		4 months	Yes		
							□ No		
							☐ Yes ☐ No		
							□ No □ Yes		
							□ No		
							☐ Yes		
3.	Do your expenses expenses of people yourself and your	e other than	■ No ] Yes						
		ır Ongoing Montl							
exp			ruptcy filing date unless y cy is filed. If this is a supp						
			government assistance included it on Schedule I: )						
	ficial Form 106l.)	anoc and nave n	ionadea it on <i>conedate it i</i>	our moome		Your exp	enses		
4.	The rental or home payments and any r		nses for your residence. In or lot.	nclude first mortgag	e 4.	\$	400.00		
	If not included in li	ne 4:							
	4a. Real estate ta	ixes			4a.	\$	0.00		
		neowner's, or rente	er's insurance		4b.	·	0.00		
			upkeep expenses		4c.		0.00		
_		association or co			4d.	·	0.00		
5.	Additional mortgag	ge payments for y	our residence, such as ho	me equity loans	5.	\$	0.00		

ebtor 1	Alex T				
ebtor 2	Katelyn	n E Graham	Case num	ber (if known)	
Utili	ities:				
6a.		y, heat, natural gas	6a.	\$	175.00
6b.	Water, se	ewer, garbage collection	6b.	\$	24.00
6c.	Telephon	e, cell phone, Internet, satellite, and cable services	6c.	\$	327.31
6d.	Other. Sp	pecify:	6d.	\$	0.00
Foo		sekeeping supplies	7.	\$	500.00
		children's education costs	8.	\$	0.00
_		dry, and dry cleaning	9.	\$	80.00
	-	products and services	10.	\$	0.00
		ental expenses	11.	· · · · · · · · · · · · · · · · · · ·	475.00
		Include gas, maintenance, bus or train fare.		Ψ	475.00
		car payments.	12.	\$	0.00
		, clubs, recreation, newspapers, magazines, and books	13.	\$	50.00
		tributions and religious donations	14.		0.00
	ırance.	in batterie and rengious dematterie		<u> </u>	<u> </u>
		nsurance deducted from your pay or included in lines 4 or 20.			
	. Life insur		15a.	\$	0.00
15b	. Health in:	surance	15b.	\$	0.00
15c	. Vehicle ir	nsurance	15c.	· -	249.16
		urance. Specify:	15d.	·	0.00
		nclude taxes deducted from your pay or included in lines 4 or 20.		<u> </u>	0.00
Spe	cify:	, , ,	16.	\$	0.00
		lease payments:	47-	ф.	2.22
		nents for Vehicle 1	17a.	·	0.00
		nents for Vehicle 2	17b.	· <u> </u>	0.00
	. Other. Sp	-	17c.		0.00
	. Other. Sp		17d.	\$	0.00
		s of alimony, maintenance, and support that you did not report a		¢	0.00
ded	ucted from	your pay on line 5, Schedule I, Your Income (Official Form 106I)	. 10.	φ	
		s you make to support others who do not live with you.	40	<b>a</b>	0.00
Spe			19.		
		perty expenses not included in lines 4 or 5 of this form or on Sch	i <b>eauie i: Yo</b> 20a.		0.00
	0 0	es on other property		· · — — — — — — — — — — — — — — — — — —	0.00
	. Real esta		20b.	·	0.00
		homeowner's, or renter's insurance	20c.		0.00
		nce, repair, and upkeep expenses	20d.	· .	0.00
		ner's association or condominium dues	20e.		0.00
Oth	er: Specify:	Internet	21.	+\$	78.00
Net	flix and H	ulu		+\$	28.24
Stu	dent loan	payments		+\$	296.31
Cal		monthly synances			
	-	monthly expenses		•	0.000.00
		4 through 21.		\$	2,683.02
22b	. Copy line 2	22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c.	. Add line 22	2a and 22b. The result is your monthly expenses.		\$	2,683.02
Cald	culate your	monthly net income.			
23a	. Copy line	12 (your combined monthly income) from Schedule I.	23a.	\$	5,433.32
		ir monthly expenses from line 22c above.	23b.	-\$	2,683.02
23c.	. Subtract	your monthly expenses from your monthly income.		_	
		t is your monthly net income.	23c.	\$	2,750.30
For e	example, do y ification to the	an increase or decrease in your expenses within the year after you expect to finish paying for your car loan within the year or do you expect you eterms of your mortgage?			e or decrease because of a
<b>I</b>					
	res.	Explain here:			

page 2

Ellin dia lat						
FIII IN THIS INTO	ormation to identify your	case:				
Debtor 1	Alex T Graham					
	First Name	Middle Name	Last	Name		
Debtor 2	Katelynn E Graha		Laat	Nama		
(Spouse if, filing)	First Name	Middle Name	Lasi	Name		
United States	Bankruptcy Court for the:	WESTERN DISTRICT (	OF WASHING	STON		
Case number						
(if known)						Check if this is an
						amended filing
<u>Official Fo</u>	<u>rm 106Dec</u>					
Declara	ation About a	n Individual	Debto	or's Schedu	les	12/15
f two married	people are filing together	r, both are equally respo	nsible for s	pplying correct inform	ation.	
	this form whenever you fi ney or property by fraud in					
	. 18 U.S.C. §§ 152, 1341, 1		niupicy case	can result in filles up	το φ230,000, οι πηρ	misonine in for up to 20
•	, ,	,				
S	ign Below					
ا Did you	pay or agree to pay some	one who is NOT an attor	ney to help	you fill out bankruptcy	forms?	
■ No						
<u> </u>						
☐ Yes.	. Name of person					etition Preparer's Notice, nature (Official Form 119)
				L	Deciaration, and Sigi	lature (Official Form 119)
	nalty of perjury, I declare	that I have read the sum	mary and so	hedules filed with this	declaration and	
that they	are true and correct.					
X /s/ A	lex T Graham		Х	/s/ Katelynn E Graha	am	
Alex	T Graham		<del></del>	Katelynn E Graham		
Signa	ture of Debtor 1			Signature of Debtor 2		
Date	November 30, 2019			Date November 30	2010	
Date	140 VEITIDET 30, 2019			November 30	, 2013	

Fil	l in this inforr	nation to identify you	r case:			
De	btor 1	Alex T Graham First Name	Middle Name	Loot Nome		
De	btor 2	Katelynn E Grah		Last Name		
	ouse if, filing)	First Name	Middle Name	Last Name		
Un	ited States Ba	nkruptcy Court for the:	WESTERN DISTRICT OF	WASHINGTON		
Ca	se number					
1	nown)					Check if this is an
						amended filing
_	· · · · –	4.07				
	ficial Fo	-				
St	atement	of Financial	Affairs for Individ	duals Filing for B	sankruptcy	4/19
			ble. If two married people a attach a separate sheet to the			
		n). Answer every que		uns form. On the top of an	y additional pages, write yo	ur name and case
Pa	rt 1: Give D	Details About Your Ma	arital Status and Where You	Lived Before		
1.	What is you	r current marital statu	ıs?			
	_					
	■ Married □ Not mai					
2.	During the l	ast 3 years, have you	lived anywhere other than v	where you live now?		
	□ No					
	Yes. Lis	st all of the places you l	ived in the last 3 years. Do no	ot include where you live now	<i>l</i> .	
	Debtor 1 Pr	ior Address:	Dates Debtor 1	Debtor 2 Prior Ac	Idress:	Dates Debtor 2
	101 NW G	lenhaven Dr	lived there From-To:	_		lived there
	Pullman, \		June 2010 -	Same as Debtor	1	Same as Debtor 1 From-To:
			September 20	17		
	■ No □ Yes. Ma	ies include Arizona, Ca	ver live with a spouse or leg lifornia, Idaho, Louisiana, Nev medule H: Your Codebtors (Of	vada, New Mexico, Puerto R		
Pa	rt 2 Explai	in the Sources of You	r Income			
4.	Fill in the tota	al amount of income yo	nployment or from operating u received from all jobs and a have income that you receive	all businesses, including part	-time activities.	endar years?
	□ No					
	Yes. Fil	I in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year untiled for bankruptcy:	■ Wages, commissions, bonuses, tips	\$44,574.00	■ Wages, commissions, bonuses, tips	\$10,265.97
			Operating a business		☐ Operating a business	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

page 1

Debtor 1 Debtor 2	Alex T Graham Katelynn E Graham	Case number (if known)					
		Debtor 1		Debtor 2			
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)		
Incluand of winni	de income regardless of whet other public benefit payments ings. If you are filing a joint ca	ther that income is taxable. E ; pensions; rental income; in ase and you have income tha	wo previous calendar years? Examples of other income are a terest; dividends; money collect you received together, list it carately. Do not include income to	ilimony; child support; Social sted from lawsuits; royalties; only once under Debtor 1.			
		Debtor 1		Debtor 2			
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)		
Part 3:	List Certain Payments Yo	u Made Before You Filed fo	or Bankruptcy				
_		• •	sumer debts. Consumer debt	s are defined in 11 U.S.C. §	101(8) as "incurred by an		

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825\* or more? □ No. Go to line 7.

☐ Yes List below each creditor to whom you paid a total of \$6,825\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

\* Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.

Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No. Go to line 7.

☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Amount you Creditor's Name and Address Dates of payment **Total amount** Was this payment for ... still owe paid

Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

No

☐ Yes. List all payments to an insider.

**Insider's Name and Address Dates of payment Total amount** Amount you Reason for this payment still owe paid

	abtor 1 Alex T Graham Alex T Graham Attelynn E Graham		Cas	e number (if known)	
8.	Within 1 year before you filed for insider? Include payments on debts guarantee	bankruptcy, did you make any p	ayments or transfer a	iny property on accou	nt of a debt that benefited an
	No				
	☐ Yes. List all payments to an ir	sider			
	Insider's Name and Address	Dates of payment	Total amount paid		eason for this payment clude creditor's name
Pai	rt 4: Identify Legal Actions, Re	oossessions, and Foreclosures			
9.		bankruptcy, were you a party in sonal injury cases, small claims actions.			
	■ No □ Yes. Fill in the details.				
	Case title Case number	Nature of the case	Court or agency	Sta	atus of the case
10.	Within 1 year before you filed fo Check all that apply and fill in the c		perty repossessed, fo	oreclosed, garnished,	attached, seized, or levied?
	No. Go to line 11.  Yes, Fill in the information be				
	Creditor Name and Address	Describe the Propert	V	Date	Value of the
		Explain what happen			property
11.		or bankruptcy, did any creditor, in yment because you owed a debt?		nancial institution, set	off any amounts from your
	Creditor Name and Address	Describe the action t	he creditor took	Date action taken	on was Amount
12.	Within 1 year before you filed fo court-appointed receiver, a cust		perty in the possessi	ion of an assignee for	the benefit of creditors, a
	No				
	☐ Yes				
Pai	rt 5: List Certain Gifts and Con	ributions			
13.	Within 2 years before you filed fo	or bankruptcy, did you give any g	ifts with a total value	of more than \$600 pe	r person?
	☐ Yes. Fill in the details for each	n gift.			
	Gifts with a total value of more per person	than \$600 Describe the gif	ts	Dates you the gifts	ı gave Value
	Person to Whom You Gave the Address:	Gift and			
14.	Within 2 years before you filed fo		ifts or contributions v	with a total value of m	ore than \$600 to any charity?
	Yes. Fill in the details for each	-		_	
	Gifts or contributions to charition more than \$600 Charity's Name Address (Number, Street, City, State ar	ĺ	ou contributed	Dates you contribute	
		,			

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster,

	or gambling?						
	■ No □ Yes. Fill in the details.						
	how the loss occurred	nclude	the amount that ins ce claims on line 33	surance has paid. L	ist pending	Date of your loss	Value of property lost
Par	17: List Certain Payments or Transfers						
16.	Within 1 year before you filed for bankrup consulted about seeking bankruptcy or pr Include any attorneys, bankruptcy petition pro	eparin	g a bankruptcy pe	tition?			erty to anyone you
	■ No □ Yes. Fill in the details.						
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo	u	Description and transferred	value of any prop	erty	Date payment or transfer was made	Amount of payment
17.	Within 1 year before you filed for bankrup promised to help you deal with your credi Do not include any payment or transfer that y	tors or	to make payment			r transfer any propo	erty to anyone who
	☐ Yes. Fill in the details.						
	Person Who Was Paid Address		Description and transferred	value of any prop	erty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankru transferred in the ordinary course of your Include both outright transfers and transfers include gifts and transfers that you have alrest No  Yes. Fill in the details.	<b>busin</b> made a	ess or financial aff as security (such as	airs? the granting of a s			
			Description and	value of	Describe		Data transfer was
	Person Who Received Transfer Address  Person's relationship to you		Description and property transfer			any property or received or debts change	Date transfer was made
19.	Within 10 years before you filed for bankribeneficiary? (These are often called asset-pinnon No Yes. Fill in the details.	u <b>ptcy,</b> protecti	did you transfer a on devices.)	ny property to a s	elf-settled tru	ıst or similar device	of which you are a
	Name of trust		Description and	value of the prope	erty transferr	ed	Date Transfer was made
Par	t 8: List of Certain Financial Accounts, I	nstrun	nents, Safe Depos	it Boxes, and Sto	rage Units		
20.	Within 1 year before you filed for bankrup sold, moved, or transferred? Include checking, savings, money market houses, pension funds, cooperatives, ass	, or oth	ner financial accou	ınts; certificates o	of deposit; sh		
	No	ocialic	nis, anu other illia	กเดเลก การแนนเบกร.	•		
	Yes. Fill in the details.						
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)		et 4 digits of ount number	Type of accour instrument	clo	te account was used, sold, oved, or nsferred	Last balance before closing or transfer

21.	•	u now have, or did you have within 1 year or other valuables?	before you filed for bankruptcy, ar	ny safe deposit box or other deposit	ory for securities,					
	_	No Yes. Fill in the details.								
	Nam	e of Financial Institution ess (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?					
22.	Have	you stored property in a storage unit or pla	ace other than your home within 1	year before you filed for bankruptcy	?					
	_	No								
		es. Fill in the details.			Do you still					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)									
Par	t 9:	Identify Property You Hold or Control for S	Someone Else							
23.		ou hold or control any property that someo		ty you borrowed from, are storing fo	r, or hold in trust					
	•	meone.	,, ,	,	,					
	<b>=</b> 1	No								
	-	er's Name ess (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value					
Par	t 10:	Give Details About Environmental Informa	ation							
For	the nu	rpose of Part 10, the following definitions	annly:							
٠.	ine pu	rpose of rail 10, the following definitions	арріу.							
	toxic	onmental law means any federal, state, or l substances, wastes, or material into the ai ations controlling the cleanup of these sub	r, land, soil, surface water, ground	<u> </u>						
		neans any location, facility, or property as n, operate, or utilize it, including disposal	-	aw, whether you now own, operate,	or utilize it or used					
		dous material means anything an environ dous material, pollutant, contaminant, or s		waste, hazardous substance, toxic	substance,					
Rep	ort all	notices, releases, and proceedings that yo	ou know about, regardless of when	they occurred.						
24.	Has a	ny governmental unit notified you that you	ı may be liable or potentially liable	under or in violation of an environm	ental law?					
		lo .								
	□ <i>1</i>	es. Fill in the details.								
		e Of Site less (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice					
25.	Have	you notified any governmental unit of any	release of hazardous material?							
		lo .								
	□ \	es. Fill in the details.								
		e of site ess (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice					

	btor 1 Alex I Granam btor 2 Katelynn E Graham		Case number (if known)		
06	Have you been a party in any judicial or adr	ministrativo procoeding under any envi	ronmontal law? Include settlements	and orders	
о.	nave you been a party in any judicial or au	ministrative proceeding under any envi	Tommentariaw? include settlements	and orders.	
	No The state of th				
	Yes. Fill in the details.	0	National of the same	01-1	
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case	
Par	rt 11: Give Details About Your Business or	,			
7.	Within 4 years before you filed for bankrup	tcv. did you own a business or have ar	y of the following connections to a	ny husiness?	
•	☐ A sole proprietor or self-employed i	• •		.y zaomoco i	
	☐ A member of a limited liability comp	•	•		
	☐ A partner in a partnership	(===, =:	·F (==: /		
	☐ An officer, director, or managing ex	recutive of a cornoration			
	☐ An owner of at least 5% of the votin	·			
	_				
	No. None of the above applies. Go to I				
	Yes. Check all that apply above and fill Business Name	Describe the nature of the business	Employer Identification number		
	Address		Do not include Social Security		
	(Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business existed		
28.	Within 2 years before you filed for bankrupt institutions, creditors, or other parties.	tcy, did you give a financial statement	to anyone about your business? Inc	lude all financial	
	■ No				
	Yes. Fill in the details below.				
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued			
Par	rt 12: Sign Below				
are t vith	eve read the answers on this Statement of Fir true and correct. I understand that making a tha bankruptcy case can result in fines up to U.S.C. §§ 152, 1341, 1519, and 3571.	false statement, concealing property,	or obtaining money or property by f		
/s/	Alex T Graham	/s/ Katelynn E Graham			
	ex T Graham gnature of Debtor 1	Katelynn E Graham Signature of Debtor 2			
Ĭ		-	•		
Dat	November 30, 2019	Date November 30, 201	9		
_ '	you attach additional pages to Your Stateme	ent of Financial Affairs for Individuals I	Filing for Bankruptcy (Official Form	107)?	
■ N □ Y	No Yes				
	you pay or agree to pay someone who is no	t an attornoy to holp you fill out banks	intov formo?		
JIa ■ N		t an attorney to help you lill out bankrt	ipicy iorina :		
	Yes. Name of Person Attach the Bankru	ıptcy Petition Preparer's Notice, Declarati	on, and Signature (Official Form 119).		

Fill in this inform	nation to identify your	case:		
Debtor 1	Alex T Graham			
	First Name	Middle Name	Last Name	
Debtor 2	Katelynn E Graha	ım		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the:	WESTERN DISTRICT C	DF WASHINGTON	
Case number				
(if known)				Check if this is an
				amended filing

### Official Form 108

### Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?	
Creditor's Alaska USA FCU	Surrender the property.	■ No	
name:	☐ Retain the property and redeem it.	_	
Description of 2014 Jeep Wrangler 89000 miles	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes	
property securing debt: Location: 18020 NW Seabeck Holly Road, Seabeck WA 98380	☐ Retain the property and [explain]:		
Creditor's <b>P1FCU</b>	■ Surrender the property.	■ No	
name:	Retain the property and redeem it.		
Description of 2008 Dodge Ram	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes	
property securing debt:	☐ Retain the property and [explain]:		
Creditor's <b>P1FCU</b>	☐ Surrender the property.	■ No	
name:	Retain the property and redeem it.	_ 110	
Description of 2018 Genesis Supreme 32CR	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes	
property <b>trailer</b>	☐ Retain the property and [explain]:		

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

Debt Debt		Alex T Graham Katelynn E Gra	ham			Case number (if known		
se	ecuring o	debt:						
	reditor's ame:	P1FCU		■ Surrender th		roperty. erty and redeem it.		□No
pr	escription operty ecuring o	on of 2016 Polemiles debt: All Terra	aris R2RXP100 1000 in Vehicle	☐ Retain the p  Reaffirmation	rope on A	erty and enter into a	_	■ Yes
in the	ny une e inform	xpired personal nation below. Do	not list real estate leases.	ed in Schedule G: E Unexpired leases a	re le	utory Contracts and Unexpire eases that are still in effect; the assume it. 11 U.S.C. § 365(p)(	e lea	eases (Official Form 106G), fill se period has not yet ended.
Des	cribe yo	our unexpired pe	rsonal property leases				Wil	I the lease be assumed?
	sor's nar	ne: of leased						No
	erty:	oi leaseu						Yes
	sor's nar	me: of leased						No
	perty:	or icascu						Yes
	sor's nar							No
	erty:	of leased						Yes
	sor's nar	ne: of leased						No
	erty:	or leased						Yes
	sor's nar	ne: of leased						No
	erty:	oi leaseu						Yes
	sor's nar							No
	erty:	of leased						Yes
	sor's nar	ne: of leased						No
	erty:	or reased						Yes
Part	3: Si	gn Below						
Unde prop	er penal erty tha	ty of perjury, I de t is subject to ar	eclare that I have indicated unexpired lease.	my intention about	any	property of my estate that se	cure	s a debt and any personal
X		x T Graham				Katelynn E Graham		
		Graham ure of Debtor 1				elynn E Graham nature of Debtor 2		
	Date	November 3	0, 2019	Date	e	November 30, 2019		

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
_	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

### **United States Bankruptcy Court** Western District of Washington

In	re	Alex T Graham Katelynn E Graham		Case No.		
		•	Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)					
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:					
		For legal services, I have agreed to accept		\$	1,500.00	
		Prior to the filing of this statement I have received		\$	1,500.00	
		Balance Due		\$	0.00	
2.	\$	335.00 of the filing fee has been paid.				
3.	The	e source of the compensation paid to me was:				
		■ Debtor □ Other (specify):				
4.	The	e source of compensation to be paid to me is:				
		■ Debtor □ Other (specify):				
		- Beotor - Guier (speeny).				
5.		I have not agreed to share the above-disclosed compensation	n with any other perso	n unless they are men	nbers and associates	of my law firm.
	☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.					y law firm. A
6.	In	return for the above-disclosed fee, I have agreed to render le	gal service for all aspe	cts of the bankruptcy	case, including:	
	<ul><li>a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;</li><li>b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;</li><li>c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;</li><li>d. [Other provisions as needed]</li></ul>					
7.	7. By agreement with the debtor(s), the above-disclosed fee does not include the following service:					
		CER	RTIFICATION			
this		ertify that the foregoing is a complete statement of any agree kruptcy proceeding.	ment or arrangement f	or payment to me for	representation of the	e debtor(s) in
	Nov	ember 30, 2019	/s/ John C. And	rews		
	Date		John C. Andrew			
Signature of Attorney Bishop, Cunningham & Andrews, Inc., (P.S.)						
3330 Kitsap Way						
			Box 5060, West Bremerton, WA			
				Fax: (360) 377-548	4	
			bca@bcalawye	rs.com		
			Name of law firm			

### **United States Bankruptcy Court** Western District of Washington

In re	Alex T Graham Katelynn E Graham		Case No.	
		Debtor(s)	Chapter	7
Γhe ab		IFICATION OF CREDITOR		of their knowledge.
Date:	November 30, 2019	/s/ Alex T Graham		
		Signature of Debtor		
		Ç		
Date:	November 30, 2019	/s/ Katelynn E Graham		
		Katelynn E Graham		

Signature of Debtor

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AES PO BOX 65093 BALTIMORE, MD 21264-5093

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